Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Substitute for form PTO-1860 (For one with from PTO-1860	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/594,315			Filing Date 27 June, 2007			☐ To be Mailed		
CLAIMS ASFILED ASFILEN ASFILENCE		Substitute	e for Form l	PTO-1360		Applicant(s) KENNEDY ET AL. Page 1 of 1								
Index														
1	CLAIMS	ASF	FILED					*			*		*	
1		Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
3	1			1				51		1				
1				1					1					
S														
6									0	1				
T														
Section Sect					 									
9														
11	9				1									
12														
13														
14 C									1					
15														
16 C 66 C 17 C 67 C 18 C 68 C 19 C 69 C 20 C 70 C 21 C 71 C 21 C 72 C 23 C 73 C 24 C 73 C 25 C 76 C 27 C 77 C 27 C 77 C 27 C 77 C 27 C 77 C 29 C 78 C 30 C 80 C 31 C 81 C 32 C 82 C 33 C 83 C 34 C 84 C 37 C 86 C <tr< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr<>														
17									С	1				
18														
20														
21 C 71 C 22 C 72 23 C 73 24 C 74 25 C 75 26 C 76 27 C 77 28 C 78 29 C 79 30 C 80 31 C 80 31 C 82 32 C 82 33 C 83 34 C 84 35 C 85 36 C 85 37 C 87 38 C 88 39 C 88 40 C 99 <td></td> <td></td> <td></td> <td></td> <td>С</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>					С									
22 C 72														
23 C 73									С					
24 C 74														
C														
26 C 76 27 C 77 28 C 78 29 C 79 30 C 80 31 C 81 32 C 82 33 C 83 34 C 84 35 C 85 36 C 86 37 C 87 38 C 88 39 C 89 40 C 90 41 C 91 42 C 92 43 C 93 44 C 94 45 C 95 46 C 96 47 C 98 48 C 98 49 1 1 49 1 1 49 1 1 <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>														
27 C 77														
28 C 78 29 C 79 30 C 80 31 C 81 32 C 82 33 C 83 34 C 84 35 C 85 36 C 86 37 C 87 38 C 88 39 C 89 40 C 90 41 C 91 42 C 92 43 C 93 44 C 94 44 C 95 44 C 99 46 C 996														
30					С			78						
31 C 81 32 C 82 33 33 C 83 34 C 84 34 C 84 34 C 84 35 C 85 36 C 86 37 C 86 37 C 88 38 C 88 88 39 C 88 88 39 C 89 40 C 90 41 C 90 41 C 90 41 C 91 1 42 C 90 44 44 C 92 43 44 C 93 44 44 C 94 44 44 44 C 94 44 44 44 C 95 44 44 44 C 95 49 44 44 44 44 C 95 49 44 44 44 44 C 95 49 49 1 1														
32 C 82 33 C 83 34 C 84 35 C 85 35 C 85 36 C 86 37 C 86 37 C 88 38 38 C 88 88 39 C 88 88 88 89 40 C 90 41 C 90 41 C 90 41 42 C 91 42 C 92 43 43 C 93 3 44 44 C 94 44 44 C 94 44 44 C 95 46 6 <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>														
33														
34 C 84														
SS C SS SS SS SS SS SS														
37														
38 C 88 39 C 89 40 C 90 41 C 91 42 C 92 43 C 93 44 C 94 45 C 95 46 C 96 47 C 97 48 C 98 49 1 99 50 1 100 Total Indep 5 Total Indep Total Depend Total Depend Total Depend Total Total Depend Total Depend Total Depend	36				С			86						
Section Sect					С									
40 C 90 41 C 91 42 C 92 43 C 93 44 C 94 45 C 95 46 C 96 47 C 97 48 C 98 49 1 99 50 1 100 Total Indep 5 Indep Total Depend Depend Depend Total Depend Total Depend Depend Total Depend Total Depend Total Depend					С			88						
41 C 91 42 C 92 43 C 93 44 C 94 45 C 95 46 C 96 47 C 97 48 C 98 49 1 99 50 1 100 Total Indep 5 Indep Total Depend Depend Total Depend Total Depend Total Depend Total Depend Total Total Depend Total Depend Total Depend														
42 C 92 43 C 93 44 C 94 45 C 95 46 C 96 47 C 97 48 C 98 49 1 99 50 1 100 Total Indep 5 Indep Total Depend 14 Total Depend Total Total Depend Total Depend Total Depend Total Total Depend Total Depend Total Depend														
43 C 93 44 44 C 94 44 45 C 95 46 46 C 96 47 47 C 97 48 48 C 98 49 49 1 99 49 50 1 100 5 Total Indep 5 Indep 1 Total Depend Depend Depend Depend Total Total Depend Depend								91						
44 C 94 45 45 C 95 5 46 C 96 6 47 C 97 7 48 C 98 8 49 1 99 99 50 1 100 100 Total Indep 5 Indep Indep Total Depend Depend Depend 10 Total Depend Total Depend Depend 10														
45														
47 C 97 48 C 98 49 1 99 50 1 100 Total Indep 5 Total Indep Total Depend 14 Total Depend Total Depend Depend Total Depend								95						
48 C 98 49 1 99 50 1 100 Total Indep 5 Total Indep Total Depend 14 Total Depend Total Opend 19 Total Total Depend	46													
49 1 99 50 1 100 Total Indep 5 Total Indep Total Depend 14 Total Depend Total Detect 19 Total Total														
Total Total Indep Total Indep Total Depend Depend Total Depend Total Depend Total Depend D					C			98						
Total					1									
Indep Indep Total Depend 14 Total Depend Total 19 Total Total Depend Total Total Depend					<u> </u>	<u> </u>						200000000000000000000000000000000000000		
Total 14 Total Depend Depend Total 19 Total				,										
Depend Depend Total 19 Total Total	Total				14			Total						
Total 19 Total Claims	Depend													
	Total Claims			1	9			Total Claims						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.